

COUNTY BOROUGH OF MIDDLESBROUGH



LOCAL EDUCATION AUTHORITY

# ANNUAL REPORT

FOR 1957

OF THE

PRINCIPAL SCHOOL MEDICAL OFFICER

ERIC C. DOWNER

M.A., D.P.H.



COUNTY BOROUGH OF MIDDLESBROUGH



LOCAL EDUCATION AUTHORITY

# ANNUAL REPORT


FOR 1957

OF THE

PRINCIPAL SCHOOL MEDICAL OFFICER

ERIC C. DOWNER

M.A., D.P.H.



Digitized by the Internet Archive  
in 2018 with funding from  
Wellcome Library

<https://archive.org/details/b29798048>

SCHOOL HEALTH DEPARTMENT,  
WOODLANDS ROAD,  
MIDDLESBROUGH.

TO THE MAYOR, ALDERMEN AND COUNCILLORS  
OF THE COUNTY BOROUGH OF MIDDLESBROUGH,  
BEING THE LOCAL EDUCATION AUTHORITY :

Mr. Mayor, Ladies and Gentlemen,

I have the honour to submit my Annual Report for the year 1957.

First of all I want to thank the members of the Education Committee and of the Child Welfare Sub-Committee for their constant support and encouragement to me in what was, for many reasons, a difficult year.

Secondly I want to acknowledge the great debt which I owe to Dr. John Cahill, his colleagues the school medical officers and the school nurses, and the staff at the clinic for their steady work throughout the year, and to Dr. Cahill in particular for the preparation of most of this report.

The increasing scope of the duties attached to the post of medical officer of health of the town have, I fear, encroached upon the amount of time available for me to give to the supervision of the School Health Service but thanks to the fidelity and diligence of your staff no great loss has accrued.

I therefore submit this report hoping that it will prove to be interesting study.

I have the honour to be Mr. Mayor, Ladies and Gentlemen,

Your obedient servant,

ERIC C. DOWNER,  
*Principal School Medical Officer.*



# CONTENTS.

	<i>page</i>
SECTION 1. Staff, etc. ... ..	7
2. School Hygiene ... ..	11
3. Medical Inspections ... ..	12
4. Mortality of School Children ... ..	16
5. Arrangements for Treatment ... ..	17
6. Handicapped Pupils ... ..	26
7. Miscellaneous ... ..	36
8. Dental ... ..	41
9. Statistics ... ..	42

	<i>page</i>		<i>page</i>
Accidents ... ..	17	Employment of School	
Audiometer ... ..	17	Children (Leavers) ...	15
Aural Clinic ... ..	17	Epileptic Pupils ...	33
B.C.G. Vaccination 14, 36		General Information ...	10
Blind & Partially Sighted		Health Education ...	37
Pupils ... ..	26	Hygiene, School ...	11
Camp School (Residential) 36		Infectious Diseases ...	37
Cerebral Palsy ... ..	34	Inspections, Medical ...	12
Child Guidance Clinic ...	22	Lung Disease (Non T.B.)...	13
Chiropody ... ..	18	Maladjusted Pupils ...	33
Clinics (List of) ... ..	6	Mass Radiography 13, 38	
Cost of School Health		Minor Ailments ... ..	17
Service ... ..	10	Mortality ... ..	16
Deaf and Partially Deaf		Ophthalmic & Orthopaedic	
Pupils ... ..	26	Clinics ... ..	18
Dental Inspection and		Physical Education ...	39
Treatment ... ..	41	Physically Handicapped ...	34
Delicate Pupils ... ..	35	Skin Diseases ... ..	14
Diphtheria Immunisation 36		Speech Clinic ... ..	19
Disabled Persons Act ...	36	Staff ... ..	7
Education Committee ...	5	Statistical Returns ...	42
Educationally Sub-Normal		Tonsils and Adenoids 18, 56	
Pupils ... ..	28	Tuberculosis ... ..	14
Employment of School		Ultra Violet Light 49, 52	
Children (Part-time) 37		Verminous Conditions ...	15

## EDUCATION COMMITTEE.

---

*Chairman :* Alderman B. RAMSEY.

*Vice-Chairman :* Alderman W. RANDALL.

Alderman W. BRECKON

Alderman Mrs. L. BURTON

Alderman W. ECKERT

Alderman J. SLATER

Alderman L. TAYLOR

Councillor J. N. BENNINGTON

Councillor J. A. BROWN, J.P., F.R.S.H.

Councillor G. A. COCKERLINE

Councillor Mrs. G. COX

Councillor A. T. CROSBY

Councillor W. FERRIER

Councillor N. S. GOLDIE

Councillor Mrs. M. B. GOODMAN

Councillor Mrs. R. M. HASTON

Councillor R. H. HUGGINS

Councillor L. KNOTT

Councillor P. J. MCGLONE

Councillor Mrs. M. McMILLAN

Councillor Rev. CANON M. O'SULLIVAN

Councillor H. PINDER

Councillor C. L. POOLE

Councillor G. S. RICHARDSON

Councillor G. R. THOMPSON

Councillor E. VALENTINE

Councillor Mrs. A. WAIN

*Co-opted Members :* Mrs. A. SCHOFIELD-COATES, J.P.

Mrs. K. OGLE, J.P.

Mrs. A. THOMPSON, J.P.

Rev. H. BRYANT

Rev. CANON T. A. NOLAN

Rev. CANON H. A. WAREHAM

W. SUTHERST

*Chairman of the Education Child Welfare Sub-Committee :*

Councillor Mrs. A. WAIN.

*Director of Education :*

STANLEY FIRST, B.SC.

## SCHOOL CLINIC AND TREATMENT CENTRES.

---

1. Central	M.A.C., Orthopaedic, Cleansing, Dental	M.O. Dental Surgeon and Nurses Daily.
2. Whinney Banks Schools	M.A.C., Dental	Nurse daily 9 a.m. to 12 noon. M.O. Thurs- day 9 a.m. Dentist (part-time).
3. Lord Street	M.A.C.	Nurses daily 9 a.m. to 12 noon (except Wed- nesday). M.O. Monday 9 a.m.
	Speech Therapist	Thursday 2 p.m.
4. Newport School	M.A.C.	Nurse Monday and Thursday 9 a.m. to 12 noon.
5. 159 Southfield Road	Child Guidance Clinic	By appointment.
6. 154 Borough Road	Speech Therapy	By appointment.
7. 17 Newlands Road	U.V.L. Clinic	Four sessions weekly.
8. Ayresome	M.A.C.	Nurse Tuesday and Thursday 9 a.m. to 12 noon.
9. Caldicotes School	M.A.C.	Nurse every afternoon. M.O. Thursday 2 p.m.
10. North Ormesby	M.A.C.	Nurse daily 9 a.m. to 12 noon. M.O. Wed- nesday 9 a.m.



## SECTION I.—STAFF, ETC.

---

Interchange of medical staff exists with the Health Department both as routine and in emergency.

### MEDICAL OFFICERS :

Name	Appointment	<i>Time given to S.H.S. in terms of full-time officer.</i>
Eric C. Downer, M.A., D.P.H.	M.O.H. and Principal School M.O.	0.09
Robert Taylor, M.B., CH.B., D.P.H.	Deputy M.O.H. & Deputy Principal School M.O.	0.09
John Cahill, B.SC., M.R.C.S., L.R.C.P.	Senior School M.O.	0.90
Katherine Macfarlane, M.B., CH.B.	School Medical Officer and A.M.O.H.	0.90
Thomas W. Hill, M.D., D.P.H.	School Medical Officer and A.M.O.H.	0.72
Janet B. Patterson, M.B., CH.B.	School Medical Officer and A.M.O.H.	0.81
Arthur J. Conlin, B.A., M.B., CH.B., B.A.O.	School Medical Officer and A.M.O.H.	0.90

### PART-TIME DENTAL ANAESTHETISTS :

H. K. Geiser, M.D., M.R.C.O.G.	General Practitioner	0.18
Harry L. Simon, M.B., B.S.	General Practitioner	0.18

AURAL SURGEON (by arrangement with Regional Hospital Board) :  
R. M. Marshall, M.B., F.R.C.S.

OPHTHALMIC SURGEONS (by arrangement with Regional Hospital Board) :

Alexander E. P. Parker, M.B., B.S., F.R.C.S.

Francis S. Hubbersty, M.B., B.CHIR., F.R.C.S.

John S. Gourlay, M.B., CH.B., D.O.M.S.

ORTHOPAEDIC SURGEONS (by arrangement with Regional Hospital Board):

Howard L. Crockatt, M.B., CH.B.

Kathleen M. Adamson, M.SC., M.B., CH.B.

PSYCHIATRIST TO CHILD GUIDANCE CLINIC :

(Vacant).

PRINCIPAL SCHOOL DENTAL OFFICER :

John Auton, L.D.S.

SCHOOL DENTAL OFFICERS :

Thomas W. Clarkson, B.D.S. (Part-time).

Elsbeth J. Turner, L.D.S. (Part-time—resigned 31.8.1957).

Margaret P. Casartelli, B.D.S. (Part-time since 1.5.1957).

SPEECH THERAPIST :

Ida M. S. Knight, F.C.S.T.

(One vacancy).

EDUCATIONAL PSYCHOLOGIST :

Richard Freyman, B.A. (since 1.2.1957).

SOCIAL WORKER (CHILD GUIDANCE CLINIC) :

Winifred Morton.

CHIROPODISTS (Part-time) :

L. Clayton, M.CH.S.

L. Vanes, M.CH.S.

W. Leybourne, M.S.S.CH.

T. Jones, M.CH.S., L.C.H.

SUPERINTENDENT NURSE :

Kathleen M. Crapper, S.R.N., S.C.M., H.V.

SCHOOL NURSES :

Betty Allinson, S.R.N., S.C.M.

Katherine Cameron, S.R.N., S.R.F.N.

Ethel Howard, S.R.N.

Irene Mole, S.R.N.

Dorothy S. Owen, S.R.N., H.V.

Myfanwy Short, S.R.N., S.C.M., B.T.A.

Elsie Smith, S.R.N., S.R.F.N.

Joan Tweddle, S.R.N.

Brenda Walsh, S.R.N., S.R.F.N.

Wilhelmina Sillett, S.R.N., S.R.F.N., S.C.M.

Edna Wilson, S.R.N., S.C.M.

AUXILIARY NURSE :

Dorothy E. Hall (since 14.2.1957).

DENTAL ATTENDANTS :

D. Nolan, S.E.A.N.

L. M. Ward.

J. Smith, S.E.A.N. (resigned 31.8.1957).

CLERICAL STAFF :

Margaret Dickinson (Senior Clerk).

Anne Botham

Elizabeth Cooper (resigned 28.2.1957).

Mary L. Doonan

Vera Newman

Mary T. Walton

Marion Wilson

NUMBER OF PUPILS : ATTENDANCE:  
COST OF SERVICE, 1957

(Supplied by the Director of Education).

PRIMARY AND SECONDARY MODERN SCHOOLS :

Number of Schools	...	...	...	...	39
Number of Departments	...	...	...	...	81
Number on Roll	...	...	...	...	26,650
Average attendance	...	...	...	...	23,999
Average percentage	...	...	...	...	90.05

SECONDARY GRAMMAR SCHOOLS :

Number of Schools	...	...	...	...	6
Number on Roll	...	...	...	...	2,582
Average attendance	...	...	...	...	2,420
Average percentage	...	...	...	...	93.73

SECONDARY TECHNICAL SCHOOL :

Number on Roll	...	...	...	...	310
Average attendance	...	...	...	...	291
Average percentage	...	...	...	...	93.87

SPECIAL SCHOOLS :

Number of Schools	...	...	...	...	2
Number on Roll	...	...	...	...	219
Average attendance	...	...	...	...	192
Average percentage	...	...	...	...	87.67

AVERAGE PERCENTAGE ATTENDANCE FOR ALL SCHOOLS ... 90.39

TOTAL NUMBER ON ROLLS (AVERAGE) ... 29,761

COST OF SCHOOL HEALTH SERVICE, 1957

(Supplied by Borough Treasurer).

Total Cost	...	...	...	...	£31,339 2s. 11d.
Government Grant	...	...	...	...	£18,901 12s. 3d.
Cost in terms of penny rate	...	...	...	...	1.998d.



## SECTION II.—SCHOOL HYGIENE.

---

I am indebted to the Director of Education for the following details :—

### “School Hygiene—Improvements to School Premises.

#### (a) SANITARY ACCOMMODATION.

Defective sanitary fittings have been replaced at Acklam Hall Secondary Grammar School, Ayresome Infants' and Senior Girls, Marton Grove Senior Boys and Girls, School for the Deaf and Fleetham Street Junior and Infants' Schools. Completely new sanitary accommodation has been installed at St. Alphonsus' R.C. School.

#### (b) HEATING, HOT AND COLD WATER INSTALLATIONS.

New boilers have been installed at St. Joseph's R.C. and Marton Road Infants and numerous smaller items of improved heating surfaces and circulations have been carried out.

The provision of hot water services has been extended to a number of the older schools, including Marton Road Junior and Senior Departments and Victoria Road Infants.

Cold water services have been improved at Marsh Road Junior School and to a lesser degree in numerous other schools.

#### (c) ELECTRICAL INSTALLATIONS.

The electrical installations at Marton Road Infants, Ayresome Domestic Science Rooms and Handicraft (Woodwork) Block have been re-wired and the lighting modernised.

#### (d) GENERAL IMPROVEMENTS.

Replacements and repairs to flooring have been carried out at many of the older schools in an effort to eliminate danger and to improve the standard of hygiene, and new windows with improved ventilation and lighting have been installed at Marton Road Junior School.”



### SECTION III.—MEDICAL INSPECTIONS.

#### PERIODIC MEDICAL INSPECTIONS.

Age Groups inspected and number of children examined in each :

Entrants	...	...	...	...	...	2,614
Intermediate (8y + 2,759; 12y + 1,566)	...				...	4,325
Leavers (Secondary Modern)	...			...	...	1,647
Total						8,586
Additional Periodic Inspections	...			...	...	1,735
Grand Total						10,321

#### OTHER INSPECTIONS:

Number of Special Inspections	...	...	...	...	6,803
Number of Re-inspections	...	...	...	...	1,817
Total					8,620

In Grammar and Technical Schools, we examined pupils in the following Groups :—

- (a) Pupils who had entered since previous medical inspection at school ;
- (b) Leavers (15 years + and upwards).

During the year under review, our staff gave an additional amount of assistance to the Health Department owing to its shortage of medical staff. As a result, our total amount of work with school children was reduced.

SCHOOL ATTENDANCE during 1957 was good (90.39%) but not as good as in the preceding year (92.00%). The chief adverse factor was an INFLUENZA EPIDEMIC which played havoc with attendance for a time. Thus, during the four weeks ended 27th September, 1957, the average attendance of all schools dropped to 75.67%. The hardest hit school was an infant department in central Middlesbrough where average attendance over that period was 59.50%. Grammar School attendance was least affected.

I am indebted to Dr. Blowers (Medical Research Council's Public Health Laboratory, Middlesbrough) for the information that the virus concerned with this epidemic was Influenza A Virus (Asian type) and that the most serious complication of the disease was Staphylococcal Pneumonia, from which four school children died.

#### PHYSICAL CONDITIONS :

Year	Satisfactory	Unsatisfactory
1957	99.2%	0.78%

#### LUNG DISEASE (other than T.B.) :

The position this year is as follows:

No. of R.M.I.	No. cases with Lung Disease (other than T.B.)	Percentage of cases
10,321	329	3.3%

This percentage compares unfavourably with the National percentage at Periodic Medical Inspections which was 2.71 in 1955 ("Health of the School Child" 1955).

The distribution of cases among certain age groups is as follows:

Age	No. Examined	No. of cases with Lung Disease (other than T.B.)	Percentage of Cases
5y +	2,614	142	5.5%
8y +	2,759	105	3.7%
12y +	1,566	39	2.5%
14y +	1,647	43	2.6%

Our 1956 return showed a similar pattern but smaller percentages of Lung Disease.

Thus, pupils tend to grow out of their lung diseases as they grow older. Yet, Reid and Fairbairn found that the incidence of Chronic Bronchitis, among postmen, increased progressively from age of 15 years onwards and that this increase was most marked in men employed in areas with increased presumptive air pollution (Lancet 1958. 1.1144). Also, in a Birmingham series, Chronic Bronchitis

was found to be the most common disease of men who had entered the seventh decade of life—affecting over 20% (Brown, McKeown and Whitefield, B.M.J. 8.3.58).

“And so, from hour to hour, we ripe and ripe,  
And then, from hour to hour, we rot and rot,  
And thereby hangs a tale.”

SKIN DISEASES :

The number of cases of skin disease showed a decrease.

1956	...	...	...	...	3,976 cases
1957	...	...	...	...	3,654 cases

IMPETIGO decreased in incidence.

1956	...	...	...	...	185 cases
1957	...	...	...	...	117 cases

SCABIES :

We encountered 24 cases during 1957. Affected children were treated in their homes by our auxiliary nurse.

TUBERCULOSIS :

Dr. B. Coutts, Chest Phsyician, states:—

“There has not been much change in the incidence of tuberculosis in school children in 1957. The number of new cases totals 20 as compared with 21 in 1956 and 20 in 1955. Unfortunately a death occurred in this group being the first one since 1951.

B.C.G. vaccination was continued of school children in contact with patients with tuberculosis and 95 were vaccinated compared with 138 in 1956 and 73 in 1955.

Of the 533 school children who have had B.C.G. since the scheme started, not one, so far as I am aware, has developed tuberculosis”.

## HEALTH AND EMPLOYMENT :

At the examination of leaver pupils, special attention is given to the bearing of defects on suitability for employment. In cases in which it is thought that defects narrow the range of suitable employment, the Youth Employment Bureau is informed and in appropriate cases, registration under the Disabled Persons' Act is advised.

## VERMINOUS CONDITIONS AND UNCLEANLINESS :

During the year our nurses carried out 132,266 inspections of pupils for verminous conditions and the number of pupils found to be verminous at one time or another, was 4,256. Thus 14.30% of children were verminous at some time during the year.

The comparable figures for 1956 were 107,271 inspections and 4,136 verminous pupils (14.27%). The degree of infestation continues to improve.

The great majority of our verminous pupils had only a small number of nits which parents cleared up quickly when notified.

Parents were instructed on how to treat the condition and DDT preparations and steel combs were supplied to them.

Thirteen pupils were compulsorily cleansed under Education Act 1944 Section 54 (3). No prosecution was made during the year.

## REFRESHER COURSES AND CONFERENCES:

During 1957, the following medical officers attended courses :

Dr. Hill      ...    Course on Ascertainment of E.S.N. Children.  
London, January 21st to February 8th.

Dr. Patterson    Course on Deafness in Children. Manchester,  
February 12th to February 15th.

Dr. Conlin    ...    Soc. M.O.H. Refresher Course. Bristol,  
March 25th to April 6th.



## SECTION IV.

### MORTALITY OF SCHOOL CHILDREN.

I am indebted to the Health Department for the following Table :

REGISTERED DEATHS OF CHILDREN (5-15 years) during 1957  
(corrected by inward and outward transfers):

Cause of Death			No. of Deaths		
			M.	F.	Total.
Leukaemia	...	...	1	—	1
Nephritis	...	...	—	1	1
Accidents	...	...	3	4	7
Influenzal Pneumonia	...	...	1	3	4
Pneumonia	...	...	2	—	2
Heart Disease	...	...	1	—	1
Carcinoma	...	...	1	—	1
Congenital Malformation			—	1	1
Tuberculosis (Other)	...		—	1	1
			—	—	—
			9	10	19
			—	—	—



## SECTION V.

### ARRANGEMENTS FOR TREATMENT.

---

#### 1. Physical Welfare of Children.

##### (a) MINOR AILMENTS :

Attendances in recent years have been as follows:—

1950	...	59,875	1954	...	55,004
1951	...	61,860	1955	...	52,512
1952	...	53,807	1956	...	46,417
1953	...	50,993	1957	...	39,067

The decrease in attendance, in recent years, is due to diminished prevalence of diseases for which school children formerly attended our clinics and also to treatment facilities provided by the National Health Service.

We treated 4,319 Accidents or Injuries. Indeed the minor accidents group is the largest single group of cases. Nearly all of these cases were slight in degree, but 159 were referred to hospital immediately for X-Ray Examination or for treatment.

Next in number to minor injuries, the largest single group of cases treated was Skin Diseases. Altogether, 3,504 cases with skin diseases made 15,274 attendances. Cases of Scabies were treated in their own homes by our Auxiliary Nurse.

##### (b) AURAL CLINIC :

A School Medical Officer held a weekly clinic to which special Ear cases were referred. At this clinic, the total number of examinations was 628. The number of pupils was 423.

Mr. Marshall saw cases weekly at North Riding Infirmary. The number of examinations was 260, 194 being new cases.

Group Audiometer Survey.—This Hearing Survey with 2120A Weston Electric Group Speech Audiometer was carried out in the 8 yr. + and 11 yr. + age groups. All children who failed were examined at the Aural Clinic.

Number of pupils tested (Group Audiometer) ... 4,700

(c) CHIROPODY :

During the year under review, 58 boys and 146 girls were treated by our Chiropodists.

(d) OPHTHALMIC CLINIC :

Our Ophthalmic Surgeons undertook four sessions weekly. During 1957 they examined 1,816 pupils. Spectacles were prescribed for 1,593 of these cases.

(e) ORTHOPAEDIC CLINIC :

Dr. Crockatt (or Dr. Adamson) attended fortnightly. The following is a brief numerical record of the year's work :—

Number of new cases seen by Orthopaedic Surgeons:

School Children	...	...	...	...	285
Pre-School Children		...	...	...	110

Number of re-attendances seen by Orthopaedic Surgeons:

School Children	...	...	...	...	229
Pre-School Children		...	...	...	103

Number of treatments by Orthopaedic Sister :

School Children	...	...	...	...	225
Pre-School Children		...	...	...	89

(f) TONSILS AND ADENOIDS :

Details of the frequency of Tonsillectomy among children examined at Routine Medical Inspections are given on page 56. The total number of pupils who had operations, under this heading, during 1957 was 745—only a minority of these cases was referred by the School Health Service.

(g) SPEECH CLINIC.

Miss Knight, Speech Therapist, reports :—

“During the past 12 months the number of children attending for weekly treatment lessons has remained at approximately the same level as the previous year; fluctuating a little, rising to 170 plus but never less than 146. There has been a definite rise in the number of post-operational cleft palate cases. The regrettable thing is numbers remaining at such a high level, leave me short of time for the working out of projects and specialised work necessary with individual children. The actual numbers spread over each week should be, if taken individually, 45 ; if taken in groups 70, so it will readily be seen that my time is fully occupied. In spite of the heavy load I have felt results to be quite gratifying because of the close co-operation of parents and teachers, and, if I appear at times to be slow in admitting from the waiting list, it is due to this and not to lack of interest in any one case.

I have endeavoured always to admit the most severe cases, with preference to children under school age and stammerers, or where progress in school suffers a set-back due to a speech problem. In the case of young children early entrance to the speech clinic minimises complications which accompany defective speech, also adjustment is reached very often without the child realizing that it had a handicap, and in the case of established stammering the time factor to re-adjust with the help and guidance of the speech therapist is very necessary.

During the year I have been able to arrange one or two talks to Parent & Teachers' Associations, and on one occasion to the Association of Infant Teachers at their monthly meeting; co-operation is the key note arising from such meetings, and I find, from the friendly interest, so much good is derived that there is a corresponding shortening of time spent in moving from school to clinic. Adjustment is reached in less time than otherwise would be the case. Parents are also very helpful and the exchange of ideas between them and myself result in greater interest and understanding in the home approach to the problem.

Perhaps a point worthy of notice is amongst defective articulation cases, in particular those unable to discriminate between sound and letter with a tendency to mirror writing. This condition in my



opinion is compelled to arouse confusion in the child's mind with a corresponding lack of confidence.

However, with training and correct approach the problem is adjustable. Speech, reading and writing make satisfactory headway and confidence is restored.

It is impossible in all cases which are sent to the speech clinic to diagnose a speech problem as an isolated one, speech being so close to the personality. A point of note is from reported cases that an average of 2% of the school population in Middlesbrough suffer from some form of speech defect; and I am sure that many cases are still not reported."

#### STATISTICAL REPORT SPEECH CLINIC :

Children on Roll 1st January, 1957:					Boys	Girls	Total
Sigmatism (Lateral & Dental) ...	...				10	6	16
Dyslalia (inc. simple and multiple) ...					21	18	39
Stammers ...	...	...	...	...	43	17	60
Pre School Age (inc. mixed symptoms, hysteric mutism, dyslalia, psychogenic disorders and a treated cretin) ...					17	11	28
E.S.N. (Educationally sub-normal) ...					16	5	21
Cleft Palate (post operational) ...	...				5	—	5
Spastic (cerebral palsy) ...	...				—	1	1
Rhinophonic (Palatal obstructed nazal passages) ...	...	...	...	...	1	—	1
					<hr/>	<hr/>	<hr/>
					113	58	171
					<hr/>	<hr/>	<hr/>

Admitted during the Year:					Boys	Girls	Total
Sigmatism	...	...	...	...	6	1	7
Dyslalia, etc.	...	...	...	...	17	7	24
Stammers	...	...	...	...	18	4	22
Pre School Age, etc.	...	...	...	...	4	2	6
E.S.N.	...	...	...	...	2	—	2
Cleft Palate	...	...	...	...	3	2	5
Rhinophonic	...	...	...	...	5	—	5
					<hr/> 55	<hr/> 16	<hr/> 71
					<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>

Discharged adjusted :					Boys	Girls	Total
Sigmatism	...	...	...	...	5	3	8
Dyslalia, etc.	..	...	...	...	18	10	28
Stammers	...	...	...	...	4	1	5
Rhinophonic	...	...	...	...	1	—	1
Pre School, etc.		...	...	...	6	1	7
E.S.N.	...	...	...	...	2	1	3
Withdrawn	...	...	...	...	8	4	12
Withdrawn (E.S.N.)			...	...	1	—	1
Left School	...	...	...	...	5	1	6
Left District	...	...	...	...	1	1	2
Refused Treatment		...	...	...	1	1	2
Unsatisfactory Attendance			...	...	11	4	15
					<hr/> 63	<hr/> 27	<hr/> 90
					<hr/> <hr/>	<hr/> <hr/>	<hr/> <hr/>

Total No. of Cases during Year	...	242
Total No. of Discharges	...	90
Total No. of Treatments	...	4519
Total No. on Register	...	152

NOTE :

Although these numbers are classified under definite headings many are suffering from mixed symptoms. I have chosen the major defect for classification purposes.



## 2. Mental Welfare of Children.

### CHILD GUIDANCE CLINIC:

At the beginning of the year the post of educational psychologist was vacant and Mr. R. Freyman, B.A., who has prepared the following report, was appointed to fill this vacancy as from 1st February.

As in many other boroughs of the size of Middlesbrough, the Child Guidance Clinic provides both clinical and general school psychological services. One of the aims of the clinic has been to improve the diagnostic procedure. Every attempt is made, by means of a variety of psychological tests, to arrive not only at a sound judgement of the children's intelligence, but also of their stage of mental growth, their learning potential, their attitude to work and other features of their personalities.

As many of the problems dealt with spring from a faulty relationship between parents and children, a great deal of work is involved with parents. This includes the taking of detailed histories of the children's earlier development, and home visiting by the social worker, some evaluation of both parents' personalities, and continuing regular discussion about the upbringing of their children in the special circumstances brought to light. Where possible and desirable, we like to see fathers at least once.

Furthermore, it is very necessary to keep in close contact with teachers because their intimate knowledge of the child and often, also, of the home circumstances, can be an invaluable factor in the final assessment of the problem. In return, teachers welcome a comprehensive report about our findings and also discussions with the educational psychologist about individual cases.

Where investigations reveal a need for psychiatric or neurological examination, or where we feel that the case is one needing psychiatric treatment, the co-operation of Dr. Cuthbert, the Superintendent of St. Luke's Hospital, is obtained, and thanks are due to him and to his staff for the great help they have given both by friendly advice and by dealing with the cases referred.

When we feel that we have sufficiently advanced in tracing some of the causes for the symptom or symptoms manifested in the cases referred to us, a decision has to be made in regard to further help which we may be able to give. Apart from referring a case to other departments or suggesting special educational treatment, the following methods of "treatment" are used.

Where it is thought that advice given to parents and/or teachers might be sufficient, such advice is given and the case kept under observation for a few months, in order to see whether improvement may be effected without regular clinic appointments.

In other cases, it is necessary to see children at the clinic regularly, either to observe their behaviour more closely, using play with toys or games, drawing, painting, etc., or, especially in the case of older children or adolescents, to try to discuss some of the problems for which they have been referred to the clinic. In some instances, the fact that the children find at the clinic a calm, well disciplined, but also understanding atmosphere, may make them feel, for a short while at least, that their personalities can be accepted by grown-ups. In time they gain confidence, and not infrequently "improve" in many different ways.

Much of the time spent on the children, would, however, be wasted if, as already mentioned, simultaneous regular discussions with the parents about the part they have to play to reduce tension or anxiety were not continued. In many cases, work with parents, either by giving plain common sense advice about the handling of their children, or by trying patiently to make parents re-shape their attitude towards them, is a priority task.

In some cases, parents who appear to be in need of psychiatric or psycho-analytic treatment, have been recommended to seek the appropriate help which we cannot give ourselves at present.

During 1957, we have begun to treat a number of nocturnal enuretic cases, not arising from known physical causes, by means of a simple device. This wakens enuretic children at the onset of urination and, by means of a psychological learning process of connecting certain apparently unrelated events and called "conditioning", links the bladder pressure with awakening rather



than with wetting. The results have been gratifying except in a few cases where the parents have failed to obey the exact instructions. We have worked out a strict follow-up programme to study the long term results in each case.

We have reduced the number of cases accepted for remedial reading, as most of these children need nothing more than frequent short periods of reading instruction by specially qualified or gifted teachers. The educational psychologist will, of course, help in diagnosing causes of reading retardation and assist in the "treatment" of particularly difficult cases. It is hoped that 1958 will see the setting up of a Peripatetic Remedial Service which will relieve the Child Guidance Clinic of its caretaker function as regards teaching children to read, although it must be said that the record of the clinic in the work of remedial reading has been a very good one. There will, of course, be close co-operation between the educational psychologist and the peripatetic teachers, and it is anticipated that the Child Guidance Clinic will continue to deal with a small number of retarded children.

Another important part of the work of the educational psychologist consists in informing teachers about new findings of modern psychology in its widest sense. To this purpose, a number of experimental discussion groups with teachers were arranged during the Autumn term. 32 teachers (12 Secondary Modern, 20 Primary) took part and 18 meetings were held. These proved to be valuable in many ways and it is hoped to continue this work in a modified form in 1958.

In November, the educational psychologist took part in a discussion on "The Teacher and The Psychologist", arranged by the Institute of Education, University of Durham, under the Chairmanship of Professor Stanley. This will be published in the Institute's journal in May, 1958.

We had also the privilege of discussing various points of procedure and reporting with the Juvenile Court Magistrates at a meeting in November when a useful working arrangement regarding the scope and limitations of the co-operation of the Child Guidance Clinic was established.

In accordance with the usual procedure the educational psychologist assisted with the interviewing of border-line candidates in the General Examination, and work in connection with the scaling of teachers' estimates was again undertaken both by the educational psychologist and the social worker.

During the year a number of talks were given to various organisations in the town.

**Child Guidance Clinic—Annual Return, 1957.**

No. of New Cases			...	82		
ATTENDANCE AT CLINIC:				CAUSES OF REFERRAL:		
Children	...	...	1445	Educational Retardation	26	
Parents/Guardians	...	...	361	Psychological examination only	...	8
				Behaviour Problems	...	28
				Nervous Habits	...	20
				Vocational Guidance	...	—
VISITS BY CLINIC STAFF:				SOURCES OF REFERRAL:		
Home	...	...	153	School Medical Officer	26	
School	...	...	154	Head Teachers	...	44
Others	...	...	43	Director of Education	8	
Lectures	...	...	3	General Practitioner	...	1
				Probation Officers	...	3
						82
						==
Children tested at school and home			10			
Cases closed during year			...	...	120	
REASONS FOR CLOSURES:						
Psychological investigation concluded			12			
Improved satisfactorily			...	...	58	
Unsuitable for treatment			...	...	3	
Improved as far as possible			...	...	7	
Referred elsewhere			...	...	17	
No treatment required			...	...	5	
Non-co-operation of parents			...	...	17	
Left district			...	...	1	
Case Load at beginning of year			...	...	96	
Case Load at end of year			...	...	58	

## SECTION VI.—HANDICAPPED PUPILS.

---

### A. Blind Pupils.

The total number of such pupils was three. They attended residential schools as follows:—

Royal Victoria School for the Blind, Newcastle-upon-Tyne	... ..	1 boy
St. Vincent's School for the Catholic Blind and Partially Sighted, Liverpool	... ..	1 boy
Awaiting Residential School Accommodation	...	1 girl

### B. Partially Sighted Pupils :

The total number of such pupils was seven. They attended schools as follows :—

St. Vincent's School for the Catholic Blind and Partially Sighted, Liverpool	... ..	1 girl
Preston School for the Partially Sighted, Preston		2 boys
Hethersett Training Establishment, Reigate	...	1 boy
East Anglian School for the Blind and Partially Sighted, Gorleston-on-Sea	... ..	1 girl
Ordinary Day Schools, Middlesbrough	...	1 boy
		1 girl

### C. Deaf Pupils :

The total number of such pupils was 22. They attended schools as follows :—

Middlesbrough Day School for the Deaf	...	10 boys
		9 girls
St. John's Residential School for the Deaf, Boston Spa, Yorks.	... ..	1 boy
Royal Residential School for the Deaf, Old Trafford, Manchester	... ..	1 boy
Burwood Park Technical School, Walton-on-Thames		1 boy



#### D. Partially Deaf Pupils :

The total number of such pupils was 14. They attended schools as follows :—

Middlesbrough Day School for the Deaf	...	7 boys
		5 girls

Ordinary Day Schools, Middlesbrough—awaiting admission to the Middlesbrough Day School for the Deaf	...	...	...	...	2 boys
-----------------------------------------------------------------------------------------------------	-----	-----	-----	-----	--------

#### MIDDLESBROUGH DAY SCHOOL FOR THE DEAF :

Miss Nixon, Headmistress reports :

“There are 80 children on the roll of the School for the Deaf (which covers Middlesbrough and adjacent areas) of whom 32 are partially deaf.

All the partially deaf children have hearing aids and find them of great benefit. Many of those profoundly deaf also have aids, not for listening to speech, this they cannot do, but for the sake of the noises they may hear, anything at all has a striking psychological effect on the child.

An interesting experiment is being tried with a 15 year old boy so deaf that no hearing aid can reach him at all. On his educational attainments he was definitely a candidate for the Mary Hare Grammar School for Deaf Children at Newbury, Berks., but as a spastic, badly crippled he was unable to go. He is therefore attending Stainsby Boys' School each morning where he works with boys of his own age in History, Geography, Art and Science, with a view to taking G.C.E. In the afternoon he returns to us for the special instruction in speech, language etc., essential for every deaf child. Thanks to the magnificent co-operation of Mr. Murray and the masters at Stainsby the experiment is so far working very successfully”.

## E. Educationally Sub-Normal Pupils :

The following arrangements were made for the education of these children :

### 1. Residential Special Schools :

Besford Court R.C. Special School, Worcester...	2 boys
Aldwark Manor Boarding Special School, Alne, near York ... ..	5 boys
High Close E.S.N. School, Wokingham, Berks. ...	1 girl
Allerton Priory R.C. Special School, Liverpool ...	1 girl
Crowthorn Residential Special School, Edgworth, near Bolton, Lancs. ... ..	1 boy 1 girl
Jesmond Dene House Residential Special School, Newcastle-upon-Tyne ... ..	1 girl
Pield Heath House R.C. Special School, Hillingdon, near Uxbridge ... ..	1 girl
Thingwall Boarding Special School, Liverpool...	1 girl
Fyling Hall School, Robin Hood's Bay, Yorks. ...	1 boy
Springhill School, Ripon ... ..	1 boy

2. Burlam Road Day (E.S.N.) School, Middlesbrough	97 boys 60 girls
---------------------------------------------------	---------------------

### 3. E.S.N. Pupils sent to Ordinary Schools

(Backward classes) ... ..	7 boys 1 girl
---------------------------	------------------

### 4. Awaiting admission to Residential Schools:

(at present attending an ordinary school) ...	1 boy
-----------------------------------------------	-------

### 5. Awaiting admission to Burlam Road (E.S.N.) School:

(at present in ordinary schools) ... ..	3 boys 2 girls
-----------------------------------------	-------------------

Details of examinations under this heading are as follows:—

1. Number of pupils ascertained as E.S.N. ...	38
2. Number of pupils found not to be E.S.N....	11
3. Number of pupils ascertained as Maladjusted	4
4. Number of pupils recommended for transfer to ordinary schools from Burlam Road School	1
	(Transferred 1958)
5. Number of E.S.N. pupils re-examined ...	38

Education Act 1944—Section 57 :

1. Number of pupils notified as Ineducable (Section 57 (3) ... ..	4
2. Number of pupils notified for Supervision (Section 57 (5) ) ... ..	5

Note on Technique of Examination.

Our medical officers always carry out I.Q. test themselves. When required, we use Porteous Maze Performance Test. I.Q.'s are corrected by Fraser-Roberts Table which we find very useful in older children.

In instances, second opinions are sought from the Educational Psychologist and the Medical Superintendent of Aycliffe Hospital. Nurses report on child's home conditions.

We are of opinion that the Ministry Forms used for recording examinations of E.S.N. Pupils are open to improvement. For instance, we cannot help wondering if it is really necessary that the medical officer who completes Forms 1.H.P. , 2 H.P. and I.Q. Form, during one session, should sign his name five times and write the same date six times.

MIDDLESBROUGH DAY SCHOOL FOR E.S.N.

Report by Mr. J. Woodhouse, Headmaster of Burlam Road School :

“This school for Educationally Sub-normal Children had 129 pupils on roll at the beginning of January, 1957. During the year



15 children left school for the reasons outlined below, and 32 were admitted, leaving a total of 146 pupils on roll at the end of 1957. Of these 88 were boys and 58 girls.

Transfer to Residential Schools	...	...	2
Transfer to another Authority	...	...	1
Transfer to Approved School	...	...	1
Admission to Hospital	...	...	1
Incapable of receiving education at school			1
Left on attaining age of 16 years	...		9

For the first time in a number of years no pupil was transferred to a normal school. A boy and a girl whose attainment in the Basic Subjects was above the required standard, were not recommended because they were considered incapable of re-adjusting themselves to a normal school environment. Another girl was noted for re-examination after an interval of one year. Several children whose original recommendation was "Education in a Residential School" responded so well to the school environment that they were retained.

In previous years children have been admitted to the school at any time during the term. At the end of 1957 there was a short waiting list of children for admission as some of the seven classes had numbers of pupils in excess of the maximum recommended for this type of school. Provision of another class at the Primary Stage would obviate the necessity for a waiting period of at least one term.

The distribution according to Chronological Age on December 31st, 1957, was as follows :—

Age.		Boys	Girls	Total
6—7 years	...	1	—	1
7— 8    „	...	8	—	8
8— 9    „	...	12	6	18
9—10    „	...	14	7	21
10—11   „	...	10	7	17
11—12   „	...	8	2	10
12—13   „	...	8	10	18
13—14   „	...	9	7	16
14—15   „	...	8	10	18
15—16   „	...	10	9	19
		<hr/>	<hr/>	<hr/>
Totals	...	88	58	146
		<hr/>	<hr/>	<hr/>



The distribution according to Intelligence Quotient was as follows:—

I.Q.		Boys	Girls	Total
45	...	1	—	1
46—50	...	2	1	3
51—55	...	11	7	18
56—60	...	9	8	17
61—65	...	18	17	35
66—70	...	20	13	33
71—75	...	20	4	24
76—80	...	4	5	9
81—85	...	2	3	5
86	...	1	—	1
		<hr/>	<hr/>	<hr/>
Totals	...	88	58	146
		<hr/>	<hr/>	<hr/>

Some children with I.Q.s of 50 and below are likely to prove ineducable. There is no sharp dividing line between the sub-normal and the ineducable, and any border-line cases are given a prolonged trial period before being assessed as ineducable.

Children at the higher level of distribution have additional disabilities of environment, temperament or physique. If, and when, these are sublimated or resolved, there is usually a marked improvement in attainments and the child may be returned to the normal school.

As measured by Schonell's Graded Reading Vocabulary Test the following are the figures for Mechanical Reading Ages for pupils in the Junior and Senior Departments of the school :—

Reading Age		Boys	Girls	Total
5— 6 years	...	9	10	19
6— 7 „	...	22	11	33
7— 8 „	...	16	12	28
8— 9 „	...	7	9	16
9—10 „	...	2	5	7
10—11 „	...	6	2	8
11—12 „	...	—	1	1
		<hr/>	<hr/>	<hr/>
Totals	...	62	50	112
		<hr/>	<hr/>	<hr/>

Pupils in the Preparatory Class with Mental Ages ranging from 3—5 years are not ready to begin formal reading. The usual pre-reading materials and aids serve to awaken interest and enable the child to recognise simple words. Children admitted to the school are in most cases unable to read, whilst children leaving school generally have Reading Ages at the top end of the scale.

#### Additional Disabilities Imposed on Innate Lack of Intelligence.

Unfavourable Environment	...	...	21
Physically Handicapped	...	...	12
Temperamental Instability	...	...	13
Speech Defects	...	...	26
Epilepsy	...	...	7
Spastics	...	...	8
Partial Deafness	...	...	2

Ten categories of Handicapped Pupils requiring special educational treatment are defined by the Ministry of Education. Six of these categories are found in this school for Educationally Sub-normal Pupils.

The School Health Service and the Child Welfare Department render valuable help in the diagnosis and treatment of these disabilities. Until these have been resolved or sublimated, the child will not respond adequately to the teacher's efforts to educate him.

Miss Knight, Speech Therapist, visits the school every Thursday morning to give treatment to children suffering from severe defects of speech.

With the exception of the most severely handicapped children, the products of the school are absorbed in simple routine jobs in local industries. Given the necessary help, the dull child is able to become a self-supporting member of society.

The Evening Institute attached to the school provides teaching in the Basic Subjects and in Manual Subjects for boys and girls who have left school."

F. Epileptic Pupils.

The total number of such pupils was four :

Chalfont Colony for Epileptics, Chalfont St. Peter, Bucks.     ...     ...     ...     ...	2 boys
Newton-Dee House—Rudolph Steiner Schools, Bielside, Aberdeenshire     ...     ...	1 boy
St. Elizabeth's School & Home for Epileptics, Much Hadham, Herts.     ...     ...	1 girl

The total number of epileptic pupils successfully attending maintained schools in 1957 was :—

- (a) 20 boys and 16 girls with Petit Mal.
- (b) 23 boys and 32 girls with other epilepsies.

The types of schools attended were as follows:—

	Petit Mal		Other Epilepsies		Total
	Boys	Girls	Boys	Girls	
Primary & Secondary Modern...	17	14	19	29	79
Secondary Grammar ...     ...	—	—	3	—	3
E.S.N. School     ...     ...	3	1	—	3	7
School for the Deaf ...     ...	—	1	1	—	2
	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
	20	16	23	32	91
	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>

G. Maladjusted Pupils :

The total number of such pupils was eight (four of these were classified in 1956 and placed in 1957) :

Wennington Hall Residential Special School, Wennington, Lancs.     ...     ...     ...	1 boy
Cotswold Chine Home-School, Nr. Stroud, Gloucestershire     ...     ...     ...	2 boys
Fyling Hall School, Robin Hood's Bay, Yorks.     ...	3 boys
Ordinary Schools     ...     ...     ...     ...	2 boys

## H. Physically Handicapped Pupils :

The total number of such pupils was 46. The following arrangements were made for their education :—

### 1. Residential Schools :

Welburn Hall Special School, Kirbymoorside	...	1 boy 3 girls
St. John's Open Air School for Boys, Woodford Bridge, Essex	... ..	1 boy
Ian Tetley Memorial Hospital Home, Harrogate...		2 boys
Coney Hill Home for Crippled Children, Margate		1 boy

### 2. Home Tuition

...	...	6 boys 2 girls
-----	-----	-------------------

### 3. Awaiting Residential School Accommodation (not attending School)

...	...	2 boys
Burlam Road (E.S.N.) School (as interim measure)		1 boy
Receiving Home Tuition	...	1 girl

### 4. Attending Ordinary Schools

...	...	8 boys 15 girls
-----	-----	--------------------

### 5. In Hospital Schools

...	...	3 boys
-----	-----	--------

CEREBRAL PALSY.—The total number of pupils on school rolls in 1957 suffering from Cerebral Palsy was 30 boys and 19 girls. Arrangements for their education were as follows:—

	Boys.	Girls.
Primary & Secondary Modern Schools	20	10
Secondary Grammar ... ..	1	—
School for E.S.N. ... ..	3	6
School for Deaf ... ..	3	1
Awaiting Residential School ...	1	—
Home Teaching ... ..	—	1
Adela Shaw Orthopaedic Hospital ...	1	—
Residential School ... ..	—	1
Examination not completed December 1957 ... ..	1	—
	<hr/> 30	<hr/> 19
	<hr/> <hr/>	<hr/> <hr/>



### J. Delicate Pupils.

The number of such pupils was 21. The following arrangements were made for their education :—

### 1. Residential Schools:

Children's Convalescent Home, West Kirby, Wirral, Chesshire	...	...	...	1 boy
St. Patrick's Open Air School, Hayling Island, Hampshire	...	...	...	1 girl
Oak Bank Open Air School, Seal, Sevenoaks, Kent	...	...	...	1 girl
Warnham Court School, Horsham	...	...		1 boy
Ingleborough Hall School, Clapham, via Lancaster, Yorks.	...	...	...	1 girl
St. Rose's R.C. Special School, Stroud, Gloucestershire	...	...	...	1 girl
Laleham House School, Margate	...	...		1 boy
2. Home Tuition	...	...	...	3 boys
3. Attending Ordinary Schools		...	...	3 boys 8 girls

## SECTION VII.—MISCELLANEOUS.

---

### A. Camp School (Residential) :

Pupils from Secondary Modern Schools and Senior Pupils from Primary Schools were sent to a residential camp school at Dukeshouse Wood, Hexham, in charge of teachers, for periods of a fortnight. All pupils were inspected by one of our staff before departure.

The number of pupils who went to camp during 1957 was 628 (339 boys and 289 girls).

### B. B.C.G. Vaccination of 13 year old Pupils:

Number	Number	Number	Number
Tuberculin Tested	Negative	Vaccinated	Absent
248	175	164	11

Our work under this heading was impeded by lack of medical staff. Tuberculin testing was done with Heaf's Gun and in cases where results were doubtful the Mantoux method was used.

### C. Diphtheria Immunisations:

During 1957, our returns for Diphtheria Immunisation were as follows:—

First injections	...	...	...	...	561
Second Injections		...	...	...	607
Booster injections		...	...	...	963
Total completed Immunisations			...	...	1,570

At the end of the year, the percentage of school children immunised was 86.63.

No case of Diphtheria occurred among school children in 1957.

### D. Disabled Persons Act :

Number of pupils placed on Disabled Persons' Register :—  
8 boys; 4 girls.

### E. Employment :

Number of pupils registered for part-time employment :

479 boys; 95 girls.

Number of pupils issued with licences to appear in public entertainment :

3 boys; 39 girls.

### F. Health Education :

Instruction on Health matters is given by medical officers and nurses in the course of routine duties which is a very practical type of Health Education.

### G. Infectious Diseases :

During 1957 the incidence of infectious diseases among school children (5-15) was as follows:—

			Male	Female	Total
Food Poisoning	...	...	4	5	9
Scarlet Fever	...	...	38	59	97
Measles	...	...	317	320	637
Whooping Cough	...	...	16	21	37
Chicken pox	...	...	371	338	709
Poliomyelitis (Paralytic)	...		1	1	2
Poliomyelitis (Non-Paralytic)			1	2	3
Dysentery	...	...	34	31	65
Meningococcal Infection	...		1	—	1
Acute Primary Pneumonia	...		5	4	9
Influenzal Pneumonia	...		7	4	11
Pulmonary Tuberculosis	...		10	11	21
Other Tuberculosis	...		—	1	1
Encephalitis	...	...	1	—	1
			<hr/>	<hr/>	<hr/>
			806	797	1,603
			<hr/>	<hr/>	<hr/>

**H. Mass Radiography :**

I am indebted to Mr. J. J. Walsh, Organising Secretary, I.C. Mass Radiography Unit, for the following statistical report :

“Number of school children X-rayed (including 1,591 leavers), showing number recalled for Large Film and referred to Chest Clinic:

	Boys.	Girls.	Total.
X-rayed on Miniature Film ...	877	978	1,855
Recalled for Large Film ...	18	21	39
Referred to Chest Clinic ...	10	9	19
Still under observation at Chest Clinic	4	3	7

Abnormalities found : One pneumonic consolidation; one pleural thickening and three miscellaneous were diagnosed from the Miniature X-ray films.

Diagnosis.	Boys.	Girls.	Total.
Pulmonary Tuberculosis requiring immediate Treatment ... ..	1	2	3
Pulmonary Tuberculosis requiring occasional Supervision ... ..	—	1	1
Healed Tuberculosis—No action required	4	1	5
Pleural Thickening ... ..	—	1	1
Bronchiectasis ... ..	2	1	3
Bronchitis ... ..	—	1	1
Pneumonic Consolidation ... ..	1	1	2
Cardiac abnormality congenital ... ..	—	2	2
Miscellaneous ... ..	—	3	3
Total ...	8	13	21

**I. Meals and Milk—Provision of :**

Although we are not directly concerned with these activities, the following statistics may be of interest :

Total number of Pupils' Dinners—2,108,182 (Paid 1,764,571; Free 343,611).

Total number one-third pint bottles of milk—4,830,985 (201,291 galls.)

Percentage of pupils taking dinner and milk on a day in November, 1957—dinners (36.2.); milk (89.4).



## J. Medical Examinations (Adult) :

The number of medical examinations carried out by our staff for superannuation purposes and on candidates for admission to Training College was 333 (males 103; females 230).

## K. Physical Education:

I am indebted to the Director of Education for the following report :—

### “PRIMARY SCHOOLS AND SECONDARY GIRLS’ SCHOOLS :

Progress has been made in all schools in all fields of physical activity. The facilities provided in the new primary schools are being shared by other schools through inter-school matches, dancing groups and small sports meetings after school hours.

There has also been an increase in the number of children attending swimming baths after school hours, so much so that space and time have had to be carefully allotted.

The usual hockey, rounders and netball rallies were held, and the country dance party in Stewart Park was again enjoyed by large numbers of primary school children of all ages from 6 to 12 years.

The number of primary school children attending the baths during school hours in the summer term has risen, and no longer can all children be accommodated. If all children are to be given an equal opportunity of learning to swim, additional swimming facilities are required.

During the year, several teachers’ courses were organised, three week-end courses being specially arranged for tennis, athletics and basic movement, for secondary teachers, while the usual course in national and folk dancing was held for primary school teachers.

### SECONDARY SCHOOL BOYS AND GIRLS :

The various branches of the Schools Athletic Association continue to flourish, and this year proved a very successful one—a number of boys and girls doing extremely well.

In Rugby and Association Football schools acquitted themselves well—one boy represented Yorkshire in Association Football.

ATHLETICS.—Two boys and one girl represented Middlesbrough in the English Schools Championships at Plymouth.

CROSS COUNTRY RUNNING.—Greater interest was shown in this group, and one boy did extremely well, winning a Yorkshire championship, while in all seven boys were represented in a Yorkshire v. Lancashire contest.

SWIMMING.—One boy and one girl represented Middlesbrough and the North East in the English Schools Swimming Championship at Bournemouth.

Awards in Life Saving were almost double those of the previous year, one girls' school winning three Life Saving trophies.

BOXING.—This section had a very successful season; 11 boys reached the quarter finals of the English Schools Boxing Association, and one boy qualified for the finals.

None of these successes would be possible without the very generous help given by men and women teachers in these out-of-school activities, and thanks are due to all who help in this way. The increased standard of work is evident in the keen competition shown in all these aspects of physical education. Thanks are due to the Parks Superintendent and his staff for all their co-operation in our activities in the Parks, particularly for the facilities for tennis."

## SECTION VIII.

### DENTAL INSPECTION AND TREATMENT, 1957.

Mr. J. Auton, Principal School Dental Officer, reports :—

“The inadequate staffing problem during the year did not improve, the last advertisement for additional staff failing to bring in a single reply.

There is a general shortage of dentists, both as regards the requirements of private practice, and the Public Health Service, and there is no evidence of any prospect of an improvement during the next few years.

Generally speaking it would appear that newly qualified dentists tend to prefer to engage in general practice, and usually under the National Health Service rather than accept public appointments.

There are two possible reasons for this. Firstly that the initial remuneration in private practice is usually higher than the commencing salary of a public dental officer, and secondly that the long term salaried prospects of a dentist taking up public dental work as a career are limited, since after a few years service, having reached his maximum salary, there is no upward progression.

During the first half of the year the services of a part-time officer were secured, but within a matter of a few months after this one of the existing part-time staff tendered her resignation for domestic reasons, so that the staffing position more or less reverted back to what it had been.

During the year there were many cases who failed to keep their treatment appointments when sent for. This was particularly so during the school holiday periods.

In these holiday periods one appreciates the fact that parents' annual holidays and arranged outings, etc., may in certain cases coincide with the appointed time of treatment, and when this happens if the parents would take the trouble to notify that the appointment was inconvenient, arrangement could be made for deferred treatment at a later date, but in the majority of cases the appointments are not kept and there is no explanation given or request for re-appointment. Also during the school holiday periods the appreciated co-operation and assistance of the school teachers in helping to get the children to attend promptly is missed.

There were 110 cases referred to the Panel of Consultants, these being in need of orthodontic treatment or requiring dentures.”



MEDICAL INSPECTION RETURNS,  
Year ended 31st December, 1957.

TABLE I.

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY  
AND SECONDARY SCHOOLS  
(including SPECIAL SCHOOLS)

A. PERIODIC MEDICAL INSPECTIONS.

Age Groups inspected and number of Pupils examined in each :

Entrants	...	...	...	...	...	2,614
Intermediate (8y + ; 12 y +)				...	...	4,325
Leavers (Secondary Modern)				...	...	1,647
				Total	...	8,586
Additional Periodic Inspections (+ Grammar Schools + Nursery Classes)				...	...	1,735
				Grand Total	...	10,321

B OTHER INSPECTIONS :

Number of Special Inspections	...	...	6,803
Number of Re-inspections	...	...	1,817
	Total	...	8,620



C. PUPILS FOUND TO REQUIRE TREATMENT:

Age Groups Inspected				For defective vision (excluding squint)	For any of the other conditions recorded in Table III	Total individual pupils
(1)				(2)	(3)	(4)
Entrants	...	...	...	25	217	236
Intermediates		...	...	207	253	453
Leavers	...	...	...	109	58	167
Total	...	...		341	528	856
Additional Periodic Inspections		...	...	76	68	164
Grand Total	...	...		417	596	1,020

D. CLASSIFICATION OF THE PHYSICAL CONDITION OF PUPILS  
INSPECTED IN THE AGE GROUPS RECORDED IN TABLE I.A.

Age Groups Inspected	Number of pupils Inspected	Satisfactory		Unsatisfactory	
		No.	% of col. 2	No.	% of col. 2
(1)	(2)	(3)	(4)	(5)	(6)
Entrants .. ..	2,614	2,587	98.97	27	1.03
Intermediate (8 yr. plus; 12 yr. plus)	4,325	4,299	99.4	26	0.6
Leavers .. ..	1,647	1,633	99.15	14	0.85
Additional Periodic Inspections ..	1,735	1,722	99.25	13	0.75
Total .. ..	10,321	10,241	99.22	80	0.78

## TABLE II.

### INFESTATION WITH VERMIN.

(1) Total number of individual examinations of pupils in schools by the school nurses or other authorised persons	...	...	...	...	...	132,266
(2) Total number of individual pupils found to be infested	...	...	...	...	...	4,256
(3) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	...	...	...	...	...	28
(4) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	...	...	...	...	...	13

TABLE III.

RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR  
ENDING 31st DECEMBER, 1957.

## A. PERIODIC INSPECTIONS :

Defect Code No.		Defect or Disease		Periodic Inspections				Total including all other age groups inspected	
				Entrants		Leavers			
				Requiring Treatment	Requiring Observation	Requiring Treatment	Requiring Observation	Requiring Treatment	Requiring Observation
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)		
4.	Skin .. ..	23	37	9	22	82	151		
5.	Eyes a. Vision ..	25	43	109	185	417	716		
	b. Squint ..	14	53	3	8	36	148		
	c. Other ..	7	4	3	4	38	35		
6.	Ears a. Hearing ..	9	15	9	16	47	83		
	b. Otitis Media	6	29	3	15	25	103		
	c. Other ..	4	4	3	3	15	15		
7.	Nose and Throat ..	56	273	8	29	123	557		
8.	Speech .. ..	8	70	2	6	20	141		
9.	Lymphatic Glands	4	105	—	2	8	200		
10.	Heart .. ..	2	41	1	14	13	127		
11.	Lungs .. ..	28	114	20	37	41	311		
12.	Developmental :								
	a. Hernia .. ..	—	6	—	—	3	9		
	b. Other .. ..	8	15	1	7	26	49		
13.	Orthopaedic :								
	a. Posture .. ..	2	11	1	8	9	69		
	b. Feet .. ..	10	25	4	15	37	97		
	c. Other .. ..	15	34	2	31	40	160		
14.	Nervous System:								
	a. Epilepsy .. ..	2	5	—	5	4	26		
	b. Other .. ..	4	11	—	4	16	51		
15.	Psychological :								
	a. Development ..	8	6	1	4	15	37		
	b. Stability .. ..	8	74	1	5	15	157		
16.	Abdomen .. ..	—	2	—	1	5	9		
17.	Other .. ..	22	28	2	15	46	103		

B. SPECIAL INSPECTIONS :

Defect Code No.	Defect or Disease	Special Inspections	
		Requiring Treatment	Requiring Observation
(1)	(2)	(3)	(4)
4.	Skin .. .. .	1,978	824
5.	Eyes—		
	a. Vision .. .. .	247	13
	b. Squint .. .. .	18	—
	c. Other .. .. .	373	68
6.	Ears—		
	a. Hearing .. .. .	36	4
	b. Otitis Media .. .. .	55	10
	c. Other .. .. .	138	89
7.	Nose and Throat .. .. .	53	9
8.	Speech .. .. .	5	—
9.	Lymphatic Glands .. .. .	7	1
10.	Heart .. .. .	2	1
11.	Lungs .. .. .	2	2
12.	Developmental—		
	a. Hernia .. .. .	—	—
	b. Other .. .. .	2	—
13.	Orthopaedic—		
	a. Posture .. .. .	—	—
	b. Feet .. .. .	29	—
	c. Other .. .. .	74	14
14.	Nervous system—		
	a. Epilepsy .. .. .	—	—
	b. Other .. .. .	2	4
15.	Psychological—		
	a. Development .. .. .	—	1
	b. Stability .. .. .	2	—
16.	Abdomen .. .. .	1	—
17.	Other .. .. .	3,730	787



TABLE IV.

TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND  
SECONDARY SCHOOLS (including SPECIAL SCHOOLS).

## GROUP 1. EYE DISEASES, DEFECTIVE VISION AND SQUINT.

	Number of cases known to have been dealt with	
	By the Authority	Otherwise
External and other, excluding errors of refraction and squint ... ..	372	7
Errors of refraction (including squint)...	1658	—
Total ...	2,030	7
Number of pupils for whom spectacles were prescribed ... ..	1,593	65

## GROUP 2. DISEASES AND DEFECTS OF EAR, NOSE AND THROAT.

	Number of cases known to have been treated	
	By the Authority	Otherwise
Received operative treatment:		
(a) for diseases of the ear ... ..	—	18
(b) for adenoids and chronic tonsillitis ... ..	—	745
(c) for other nose and throat conditions ... ..	—	68
Received other forms of treatment ...	510	—
Total ...	510	831
Total number of pupils in schools who are known to have been provided with hearing aids:		
(a) in 1957 ... ..		10
(b) in previous years ... ..		75

GROUP 3.—ORTHOPAEDIC AND POSTURAL DEFECTS.

	By the Authority	Otherwise
Number of pupils known to have been treated at clinics or out-patient departments	285	40

GROUP 4.—DISEASES OF THE SKIN (excluding uncleanliness for which  
see Table II.)

	Number of cases treated or under treatment during the year by the Authority
Ringworm—(i) Scalp	4
(ii) Body	5
Scabies	24
Impetigo	117
Other skin diseases	3,504
Total	<u>3,654</u>

GROUP 5.—CHILD GUIDANCE TREATMENT.

Number of pupils treated at Child Guidance Clinics under arrangements made by the Authority	178
---------------------------------------------------------------------------------------------------	-----

GROUP 6.—SPEECH THERAPY.

Number of pupils treated by Speech Therapists under arrangements made by the Authority	242
----------------------------------------------------------------------------------------------	-----

GROUP 7.—OTHER TREATMENT GIVEN :

(a). Number of cases of miscellaneous minor ailments treated by the Authority                    ...        ...        ...	6,974
(b) Pupils who received convalescent treatment under School Health Service arrangements        ...        ...	7
(c) Pupils who received B.C.G. vaccination                    ...        ...        ...	164
(d) Other than (a), (b) and (c) above (specify)	
1. Ultra Violet Light        ...        ...	126
2. Chiropody                    ...        ...        ...	204
3.	
4.	
5.	
Total (a)—(d)        ...	<u>7,475</u>

TABLE V.

## DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY.

(1) Number of pupils inspected by the Authority's Dental Officers:					
(a) At Periodic Inspections	...	...	...	...	12,931
(b) As Specials	...	...	...	...	1,489
Total (1)					14,420
(2) Number found to require treatment	...	...	...	...	7,022
(3) Number offered treatment	...	...	...	...	6,220
(4) Number actually treated	...	...	...	...	3,427
(5) Number of attendances made by pupils for treatment, including those recorded at heading 11 (h)	...	...	...	...	4,369
(6) Half-days devoted to Periodic (School) Inspection	...	...	...	...	109
Treatment	...	...	...	...	719
Total (6)					828
(7) Fillings : Permanent Teeth	...	...	...	...	1,080
Temporary Teeth	...	...	...	...	129
Total (7)					1,209
(8) Number of teeth filled : Permanent Teeth	...	...	...	...	1,008
Temporary Teeth	...	...	...	...	129
Total (8)					1,137
(9) Extractions : Permanent Teeth	...	...	...	...	1,466
Temporary Teeth	...	...	...	...	4,163
Total (9)					5,629
(10) Administration of general anaesthetics for extraction	...	...	...	...	1,571



(11) Orthodontics :

(a) Cases commenced during the year	...	...
(b) Cases carried forward from pervious year	...	...
(c) Cases completed during the year	...	...
(d) Cases discontinued during the year	...	...
(e) Pupils treated with appliances	...	...
(f) Removable appliances fitted	...	...
(g) Fixed appliances fitted	...	...
(h) Total attendances	...	...

(12) Number of pupils supplied with artificial dentures ...

Owing to the shortage of staff in our service orthodontic work and provision of dentures carried out by arrangement with consultant dentists.

(13) Other operations :

Permanent Teeth	...	...	...	...	...	454
Temporary Teeth	...	...	...	...	...	66
Total (13)						<u>520</u>

3. TYPE OF EXAMINATION AND/OR TREATMENT provided, at the school clinics returned in Section II, either directly by the Authority or under arrangements made with the Regional Hospital Board for examination and/or treatment to be carried out at the clinic.

Examination and/or treatment  (1)	Number of School Clinics (i.e. premises) where such treatment is provided :	
	Directly by the Authority  (2)	Under arrangements made with Regional Hospital Boards or Boards of Governors of Teaching Hospitals  (4)
A. Minor ailment and other non-specialist examination or treatment ... ..	7	
B. Dental ... ..	2	...
C. Ophthalmic ... ..	—	At North Riding Infirmary
D. Ear, Nose and Throat...	—	do.
E. Orthopaedic ... ..	1	And Adela Shaw Hospital
F. Paediatric ... ..	—	General Hospital
G. Speech Therapy ... ..	2	...
H. Others (specify):		
Ultra Violet Light ... ..	1	...
Child Guidance Clinic	1	...
Chiropody ... ..	At Chiropodists' Surgeries	

4. CHILD GUIDANCE CLINICS :

(1) Number of Child Guidance Clinics provided by the Authority ... .. 1

(2) Staff of Clinics :

	Number	Aggregate in terms of the equivalent number of whole-time officers
Psychiatrists ... ..	—	—
Educational Psychologists ...	1	1.00
Psychiatric Social Workers ...	—	—
Paediatricians, Play Therapists, Social Workers, etc. ( <i>excluding</i> Clerks) (specify):		
Social Workers ...	1	1.00

Selected cases referred to Psychiatrist, St. Luke’s Hospital, Middlesbrough.

MINISTRY OF EDUCATION  
SCHOOL HEALTH SERVICE STAFF AND SCHOOL CLINICS.

Local Education Authority Middlesbrough County Borough,  
Return for 31st December, 1957.

1. STAFF OF THE SCHOOL HEALTH SERVICE (excluding Child Guidance)

Principal School Medical Officer ... Eric C. Downer.  
Principal School Dental Officer ... John Auton.

	Number of Officers	Numbers in terms of full-time officers employed in the School Health Service
(a) Medical Officers (including the Principal School Medical Officer):—		
(i) Whole-time School Health Service .. .. .	—	—
(ii) Whole-time School Health and Local Health Service ..	7	4.42
(iii) General practitioners working part-time in the School Health Service .. ..	2	0.36
(b) Physiotherapists, Speech Therapists, etc. (specify):—		
Speech Therapist .....	1	0.90
.....		
(c) (i) School Nurses .. .. .	12	12.00
(ii) Number of the above who hold a Health Visitor's Certificate ..	2	
(d) Nursing Assistants .. .. .	1	1



	Officers employed on a salary basis		Officers employed on a sessional basis	
	Number of Officers	Number in terms of full time officers in the school Dental Service	Number of Officers	Number in terms of full time officers in the school Dental Service
(e) Dental Staff				
(i) Principal School Dental Officer ..	1	1.00		
(ii) Dental Officers ..	1	0.54	1	0.36
(iii) Orthodontists (if not already included in (e)(i) or (e)(ii) above)				
Total ..	2	1.54	1	0.36
			Number of Officers	Number in terms of full- time officers employed in the School Dental Service
(iv) Dental Attendants			2	2.00
(v) Other Staff (specify) .....				

2. NUMBER OF SCHOOL CLINICS : 10.

MIDDLESBROUGH COUNTY BOROUGH  
SCHOOL HEALTH SERVICE.

Number of Children examined in 1957 and proportion who have  
undergone TONSILLECTOMY:

Type of School and Age Group	Boys			Girls		
	No. Ex- amined	Tonsill- ectomy	%	No. Ex- amined	Tonsill- ectomy	%
Primary & Secondary Modern						
Entrants 5 plus	1354	78	5.76	1260	84	6.66
Intermediate 8 plus	1412	330	23.37	1347	292	21.68
Intermediate 12 plus	824	231	28.04	742	220	29.64
Leavers 14 plus	807	225	27.88	840	236	28.09
Secondary Grammar and Technical .. ..	643	215	33.44	664	231	34.79
Special Schools:						
Day School for E.S.N. ..	81	20	24.69	45	16	35.56
School for the Deaf ..	41	11	26.83	38	15	39.47
Nursery Classes .. .. (Age under 5)	34	2	5.88	27	2	7.41
	5196	1112	21.40	4963	1096	22.08

Dr. Henderson of Ministry of Education kindly sent us a copy of a return on tonsillectomies on a national basis for 1956. The figures show no clear cut regional pattern but snatches of pattern may be discerned:—

(a) County Boroughs with highest operation rates include an undue proportion of residential areas. Thus, Leaver rates of over 35% occur in Bath, Bournemouth, Canterbury, Eastbourne, East Ham. Leaver rates of under 10% are found in Bootle, Gloucester, St. Helen's, South Shields—all with one possible exception, industrial towns. The percentage of population in Registrar General's social classes I and II in each of these towns at 1951 Census illustrates this point.

Bath	...	...	23.0%	Bootle	...	...	8.0%
Bournemouth	...	...	29.1%	Gloucester	...	...	15.6%
Canterbury	...	...	17.4%	St. Helens	...	...	8.5%
Eastbourne	...	...	26.7%	South Shields	...	...	11.9%
East Ham	...	...	11.6%				

All, except one, well above national mean percentage of 15.3%.

All below national mean average of 15.3% except one which is just above it.

Intermediate rates of over 35% are found in Blackburn and Brighton. Intermediate rates of under 10% occur in Bootle, Gloucester, Plymouth, St. Helens, Wallasey. Now, our pattern has become a bit blurred !

(b) Not many pupils have Tonsillectomy while attending Secondary Schools. Thus we may accept the Leaver operation rate as an index of frequency of operation 4 to 5 years ago. If we accept the Intermediate operation rate as an index of what has happened more recently, we find a slight decline in frequency of operation both on an overall national basis (0.7%) and an overall County Borough basis (0.5%). If, however we examine the position in towns with high Leaver rates we find a very big change indeed. The Intermediate operation rate is much lower than the Leaver operation rate indicating a marked decrease in frequency of Tonsillectomy in those areas.

Examples are:—

County Borough	Leaver Rate	Intermediate Rate
Bath ... ..	38.9%	25.9%
Bournemouth ...	37.5%	29.8%
Canterbury ... ..	38.6%	23.4%
Eastbourne ... ..	35.5%	25.6%
East Ham ... ..	41.7%	32.7%

(This change is not evident in towns quoted with low operation rates).

The 1956 operation rates for Middlesbrough were distinctly above national mean rates but we were not in group of towns with very high rates:—

Area	Entrant Rate	Intermediate Rate	Leaver Rate
England & Wales	6.9%	20.2%	20.9%
County Boroughs	6.9%	20.6%	21.1%
Middlesbrough	7.9%	29.2%	26.3%

Our 1956 figures show no decrease in Intermediate Group rate such as occurred in so many other towns but our 1957 return shows this feature:—

Entrant Rate	Intermediate Rate	Leaver Rate
6.2%	22.54%	27.9%

It remains to add that, in this town, only a minority of those children who had Tonsillectomy was referred by school Medical Officers.









H. & F. STOKELD  
PRINTERS  
GRANGE ROAD, MIDDLESBROUGH